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023720

7590

07/06/2005

WILLIAMS, MORGAN & AMERSON, P.C.

10333 RICHMOND, SUITE 1100

HOUSTON, TX 77042

08/30/2005 NNGUYEN2 00000005 09809534

01 FC:1501 1400.00 OP
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<u>CYNDE MEINHART</u>	(Depositor's name)
<u>CYNDE MEINHART</u>	(Signature)
<u>AUGUST 26, 2005</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/809,534	03/15/2001	Michael Charles Milner Cockrem	2027.601000	4508

TITLE OF INVENTION: AZEOTROPIC DISTILLATION OF CYCLIC ESTERS OF HYDROXY ORGANIC ACIDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	10/06/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MANOHARAN, VIRGINIA	1764	203-029000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

WILLIAMS, MORGAN & AMERSON, P.C.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 1

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- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0786/KG (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Kenneth D. Goodman

Date

8/26/05

Typed or printed name

KENNETH D. GOODMAN

Registration No.

30,460

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